



Bradford County Fire Inspection Services
Building, Zoning & Planning
945-F North Temple Ave.
Starke, FL 32091
Phone: 904-966-6202 / 904-966-6223
Fax: 904-966-6220
www.bradfordbuild.com



Duties of Fire Watch Personnel

The detail will consist of walking the building or assigned area to ensure that monitoring of the fire and life safety conditions. Fire Watch Personnel are to review the interior and exterior of the building to familiarize themselves with the locations of all life safety and fire protection devices. Fire Watch Personnel must carry a cell phone at all times.

Personnel shall walk the building or area assigned on an hourly basis looking for hazards. For areas with sleeping accommodations, the area shall be patrolled at least every half-hour.

Check all rooms including those not normally occupied such as electrical, storage, and trash rooms.

Check all exits to ensure that they are not blocked or locked.

Identify and mitigate any potential issues that may cause or contribute to a fire.

Maintain the Fire Watch Log that is attached.

Should an incident occur, the following steps must be taken immediately:

Activate the building alarm system (if in operation)

Notify 911 via cell phone

Notify occupants and begin evacuation of occupants

If necessary and safe, use fire extinguishers to control fire

Ensure you can evacuate the building safely

Meet firefighting crews when they arrive on scene and direct them to the emergency

FIRE WATCH LOG

Log time on an hourly basis. For areas with sleeping accommodations, log time every half-hour with a note in the comments documenting the half-hour inspection.

Date	Time	Signature	Comments
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DEPARTMENT OF FINANCIAL SERVICES
Division of State Fire Marshal

**RECORD OF EMERGENCY
EGRESS AND RELOCATION DRILLS**

PROVIDER: _____

ADDRESS: _____ CITY: _____

INSTRUCTIONS: ONE SECTION OF THIS FORM SHALL BE COMPLETED WITH THE FOLLOWING INFORMATION FOR EACH DRILL CONDUCTED. THIS FORM CAN BE USED TO RECORD THREE SEPARATE DRILLS.

- a) Date of drill
- b) Time in minutes and seconds required from the initiation of the drill for the full egress of all occupants
- c) Total number of occupants and the total number of related family members
- d) Location and type of the simulated fire such as a range top in the kitchen or trash container in the bath
- e) Time of day or night that the drill was conducted
- f) Any unusual occurrences that may have impacted the success of the drill
- g) Name of the responsible party that conducted the drill and the name of any witness present that does not live in the home

DATE:	EGRESS TIME: M/S	# OCCUPANTS:	# FAMILY:
SIMULATED FIRE LOCATION:			
SIMULATED TYPE FIRE:		TIME OF DRILL:	
UNUSUAL OCCURRENCES EFFECTING EXIT DRILL TIME IF MORE THAN 3 MINUTES:			
DRILL CONDUCTED BY:			
WITNESS:			

DATE:	EGRESS TIME: M/S	# OCCUPANTS:	# FAMILY:
SIMULATED FIRE LOCATION:			
SIMULATED TYPE FIRE:		TIME OF DRILL:	
UNUSUAL OCCURRENCES EFFECTING EXIT DRILL TIME IF MORE THAN 3 MINUTES:			
DRILL CONDUCTED BY:			
WITNESS:			

DATE:	EGRESS TIME: M/S	# OCCUPANTS:	# FAMILY:
SIMULATED FIRE LOCATION:			
SIMULATED TYPE FIRE:		TIME OF DRILL:	
UNUSUAL OCCURRENCES EFFECTING EXIT DRILL TIME IF MORE THAN 3 MINUTES:			
DRILL CONDUCTED BY:			
WITNESS:			